Value of hospital libraries: the Fuld Campus study

By Theresa M. Cuddy, MLS AHIP*
tcuddy1@yahoo.com

189 North Park Drive
Levittown, Pennsylvania 19054

Objective: The paper demonstrates the value of the Health Sciences Library/Fuld Campus to the organization and shows how responses from patrons aligned themselves with the categories of the taxonomy of contributions of library and information services (LIS) to hospital and academic health centers devised by Abels et al.

Methods: Over a period of thirty-two months during 2001 to 2003, patrons' literature searches and interlibrary loans were followed up on by sending patrons letters, which included a question asking for feedback as to how the information was used. The comments from users were analyzed according to Abels et al.'s taxonomy of LIS contributions in hospital and academic health centers.

Results: Results of this study substantiated previous research showing that health sciences LIS contributes to patient health care. Feedback also demonstrated other areas where LIS contributes to the mission and goals of the organization and how these align themselves with Abels et al.'s taxonomy.

INTRODUCTION

In 1983, the Health Care Financing Administration (HCFA), under the Department of Health and Human Services, proposed changes to the Medicare and Medicaid programs. Specifically, they proposed deleting the regulation requiring hospitals to ''maintain a medical library, in or adjacent to the facility, containing modern textbooks, journals, and periodicals'' to qualify for Medicare reimbursement [1]. In 1983, HCFA officially eliminated this requirement and, in turn, gave each hospital the choice to maintain or eliminate its medical library. Garfield warned that the passage of this HCFA regulation might encourage US hospital administrators to eliminate their libraries as a cost-cutting measure [2]. Indeed, in the wake of the passage of this regulation, hospital administrators, realizing they no longer legally or financially need a medical library or professional medical library staff, are cutting budgets, eliminating staff, and closing libraries.

Clearly, for hospital libraries to survive, their existence must be validated and their contributions must be shown to be consistent with the overall goals of the hospitals they serve. As Garfield states, ''unless the hospital library becomes fully recognized as a legitimate part of the medical facility, cost-conscious administrators will use outdated models of library service to cut library budgets'' [2]. In the case of public libraries, Morris et al. note that the library is often not a unique provider of certain services [3]. Although potentially difficult and expensive, it is nonetheless possible to find other sources capable of providing the same services that public libraries provide. Similarly, hospital libraries may no longer function as unique providers of specialized services. As hospital library budgets and staffing shrink, personnel must function without their services or find alternative sources of information that may not be of the same quality.

The purpose of this study was to demonstrate the value of the Health Sciences Library at Capital Health System (CHS)/Fuld Campus to the administrators and institution it serves. To do this, feedback obtained from library patrons about the library services they received was analyzed according to Abels et al.'s taxonomy of the contributions of library and information services (LIS) in hospital and academic health centers [4]. This taxonomy identifies LIS contributions in the framework of general organizational goals and organizational missions.

Located in the diverse city of Trenton, New Jersey, the Health Sciences Library at CHS/Fuld Campus is a busy library serving residents, interns, physicians, administrators, nursing students, faculty, and all employees. The library is open Monday through Friday; residents and physicians have twenty-four-hour access. The hospital merged with Mercer Medical Center to form CHS in December of 1997. Although each hospital kept its own separate library, all hospital personnel can use either library.

* Previously at Capital Health System/Fuld Campus, 750 Brunswick Avenue, Trenton, New Jersey 08638.

METHODS

The data for this study came from feedback requests sent to CHS/Fuld Campus library patrons asking for comments about the value of the specific information they received from the library. Two hundred and fourteen requests were sent out to library patrons who had requested a literature search or an interlibrary loan over the course of 32 months between 2001 and 2003. Of the 214 feedback requests sent to library patrons, 56 patrons completed the forms, a moderate response rate of approximately 26%.

The sample of library patrons was selected monthly from the literature search and interlibrary loan requests processed each month. A form letter (adjusted to reflect the original information request) that included an open-ended question was sent to each selected patron. To minimize the respondents' burden, only one feedback request was sent to each patron each year, although patrons might have made multiple requests. The request for feedback was sent when their first request for information for the year was received. Feedback requests were not sent to nursing students, medical residents, or the public.

Similar to a question used in the value study conducted by Urquhart and Hepworth, the feedback request included the question:

We like to continuously validate and keep records of the contributions that the Health Sciences Library makes to the hospital and/or patient care. Can you please take a moment and write how the information you received helped yourself and ultimately the hospital? [5]

Initially, the feedback requests were delivered to each selected patrons' designated box in the hospital mailroom. Feedback requests for physicians were put in the physicians' lounge. However, this approach yielded a relatively low response rate. To remedy this low response rate, a formal letter typed on company letterhead was enclosed with the feedback request in a company envelope. This way, they appeared more professional and were not as easily mistaken for junk mail. The majority of requests were put in the selected patrons' mailboxes. To assure receipt, rather than leave them in the physicians' lounge, feedback requests for physicians were mailed directly to their offices. When feedback requests were received, they were recorded as complete indicating that no other requests should be sent to that patron during that year. If patrons did not complete the feedback request and were continuous library users, another request was sent when they asked for information again that year.

The data were initially organized in time sequence order and examined for similar themes and emerging patterns. Similar responses provided by different patrons were logically grouped together into general content areas and counted. After all the forms were received and analyzed, each response was also categorized according to Abels et al.'s taxonomy of LIS contributions in hospital and academic health centers [4]. While some responses could fit into more than one content area (such as "development of new CHS programs," "education/teach staff and personnel," and "write article for publication"), only the most clearly delineated one was used in this study. Some study participants responded with a general thank you for excellent and timely service. These data were excluded from this study.

RESULTS

The study data included a total of ninety-one unique examples from fifty-six library patrons of how the information they received from the CHS/Fuld Campus library proved helpful. Twenty-one different general content areas of helpful information that related to the taxonomy were identified from ninety-one examples. These are illustrated in Figure 1.

As shown in Figure 1, "patient care" emerged as the largest content area of helpful information received from the library (approximately 32%). The second largest content area represented in the data, "presentations at CHS and elsewhere," included approximately 14% of all examples, while "develop policy and procedures" included 11% of all examples. Approximately 6% of the examples fell into the category, "develop new CHS programs." "Write an article for publishing" and "educate/teach staff and personnel" both represented approximately 4% of all examples. Information obtained from the library was used to develop at least 3 "care paths" and 3 "marketing strategies" at CHS (approximately 3% of all examples). The content areas of "JCAHO surveys" and "educational program development" both received 2 responses (approximately 2% of all examples).

During the thirty-two-month study period, at least one information service provided by the library contributed to each of the following content areas: "determining outcome of measures," "support cutting edge procedures," "employee and family care," "provide need for additional staff," "school (master's degree)," "improve assessments," "research on patients," "improve standards," "write proposals," and "performance improvement study."

These areas can be analyzed using Abels et al.'s recent taxonomy of LIS contributions to hospital and academic health centers [4]. Sponsored by the Medical Library Association, Abels et al. have developed a taxonomy of LIS contributions using data from hospitals and academic health sciences libraries. This taxonomy identifies a variety of possible contributions of library and information services in the framework of their relationship to organizational missions and organizational goals.

When analyzed using Abels et al.'s taxonomy, the data from the current study indicate that the information received from the CHS/Fuld Campus library contributes to the goals and missions of the institution it serves. Table 1 illustrates the relationship between selected content areas found in the current study data and the elements in the taxonomy. More specifically,

Figure 1
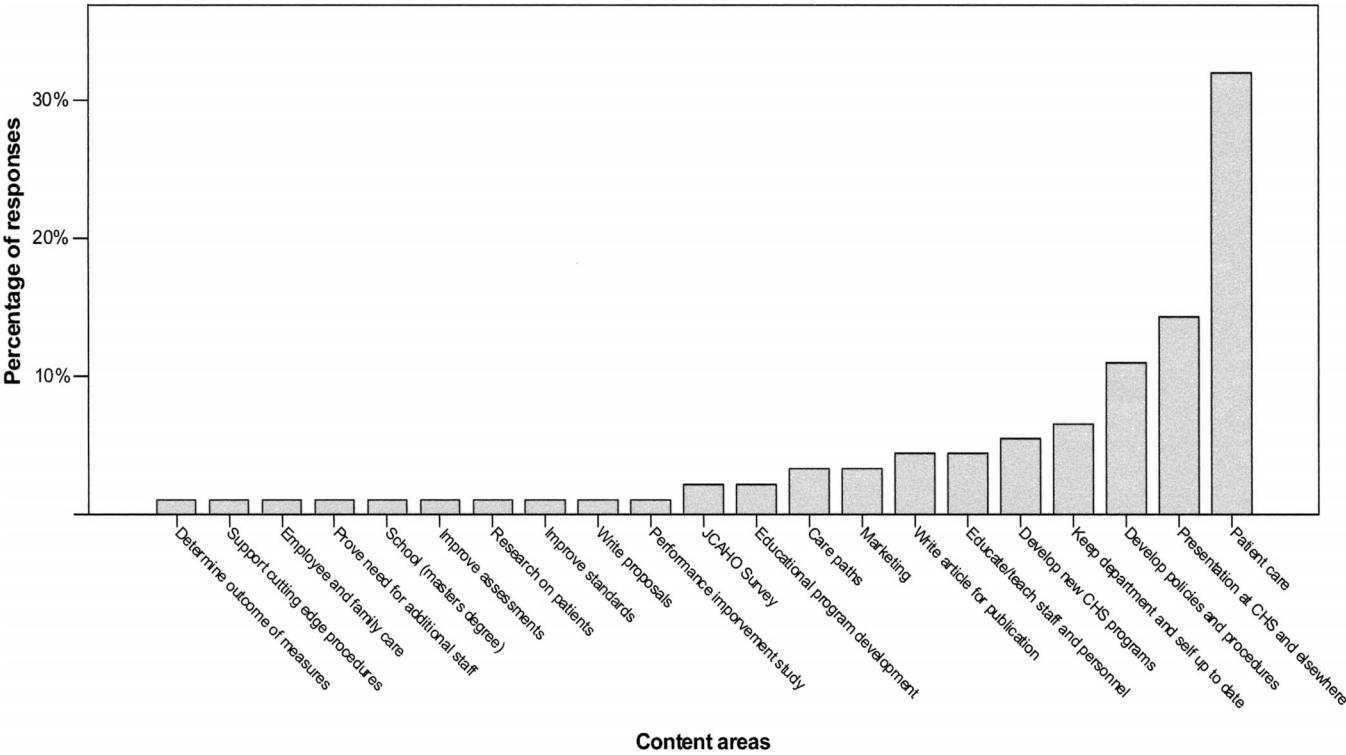General content areas of helpful information related to the taxonomy

DISCUSSION

Table 2 provides a similar illustration but also includes examples of actual patron responses.

The results of this study corroborate previous studies showing that medical library services improve patient care [6–15]. Interestingly, the study results show that in addition to patient care, the CHS/Fuld Campus Health Sciences Library also positively contributes to a broad range of other important topic areas, as shown in Figure 1.

When analyzed using Abels et al.'s recent taxonomy, this study demonstrates that these important topic areas are generally in accordance with the overall organizational missions and the organizational goals of health sciences libraries [4]. The results of this study illustrate the ability of the CHS/Fuld Campus library to provide valuable information related to a variety of content areas that support the overall missions and goals of the institution that it serves. Thus, this study clearly demonstrates the value of the Health Sciences Library at CHS/Fuld Campus to the administrators and the institution it serves and provides evidence supporting the continued existence of health sciences libraries.

Table 1
Sample relationship between Abels et al.'s taxonomy of library and information services contributions in hospitals and academic health centers and content areas in current study data

Organizational mission	Organizational goal	Current study content area
Clinical Care	Provide excellent clinical care	Patient care
	Promote clinical learning	
	Provide excellent clinical care	Develop policies and procedures
Education	Provide excellent educational programs	Educational program development
	Provide excellent educational programs	Develop new Capital Health System (CHS) programs
	Provide excellent educational programs	Educate/teach staff and personnel
	Provide resources and services necessary for teaching and learning	Presentations at CHS and elsewhere
Management of Operations	Foster satisfaction among current staff	Write article for publication
	Increase profitability	Marketing
	Meet accreditation standards	Joint Commission on Accreditation of Healthcare Organizations (JCAHO) survey
	Provide an organizational learning environment	Keep department and self up-to-date
	Reduce corporate risk	Care paths

Table 2
Relationship between selected examples of how information from the Health Sciences Library at Capital Health System/Fuld Campus was helpful to library patrons and the institution it serves and Abels et al.'s taxonomy of library and information services contributions in hospitals and academic health centers

Selected example	Origin of request	Organizational mission	Organizational goal
"Articles were used to implement changes in medication prescribing and monitoring of specific drugs."	Pharmacist	Clinical Care	Promote clinical learning
"About verbal orders, prescribing and time frames for countersigning those verbal orders are very helpful in responding to the JCAHO inquiry."	Pharmacy	Management of Operations	Meet accreditation standards
"Key in developing a workshop I gave at the [New Jersey/Pennsylvania American Academy of Family Physicians] presentation in Philadelphia . . . the studies were presented as an [evidence-based medicine]–based presentation."	Residency Program Faculty	Education	Provide excellent educational programs
"I would like to thank you for taking the time to get the Side Effect Rating Scale for me. I used this information for some research I am doing on my patients."	RN	Research and Innovation	Foster research
"It was information that I needed for a family member to assist in making an informed choice as to which medication use more specified in treating her symptoms."	Nurse	Service	Improve lives of patients and families

CONCLUSION

This study clearly demonstrates the value of the information provided by the Health Sciences Library at CHS/Fuld Campus to the institution it serves. Although the findings from this study are only relevant for this particular library, they could easily be applied to other hospitals and other medical libraries. To this end and to obtain validation of this study's findings, future research could replicate this study at a different organization. Further, modifications to this study, including broadening the sample to include both residents and medical students, adjusting the open-ended question to be more general, and lengthening the duration of the study might provide additional insight into the value of the information provided by hospital libraries. Only by being proactive will librarians be able to validate the contributions health sciences libraries make to the goals and missions of the hospital organizations they serve.

ACKNOWLEDGMENTS

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